PTO/SB/06 (07-06)

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PATENT APPLICATION FEE DETERMINATION RECORD Substitute for Form PTO-875								Application or Docket Number 10/567,391			ing Date 14/2006	To be Mailed	
APPLICATION AS FILED - PART I (Column 1) (Column 2)								SMALL	ENTITY			HER THAN	
FOR NUMBER FILED				.ED	NUMBER EXTRA			RATE (\$)	FEE (\$)		RATE (\$)	FEE (\$)	
	BASIC FEE (37 CFR 1.16(a), (b),	or (c))	N/A		N/A			N/A			N/A		
	SEARCH FEE (37 CFR 1.16(k), (i),	or (m))	N/A		N/A			N/A			N/A		
	EXAMINATION FE (37 CFR 1.16(o), (p),		N/A		N/A			N/A			N/A		
	FAL CLAIMS CFR 1.16(i))		20 minus 20 =		• 0			x \$ =		OR	X \$50 =	0	
	EPENDENT CLAIM CFR 1.16(h))	S	5 minus 3 = *		2			x \$ =			X \$200 =	400	
If the specification and drawings exceed 100 (APPLICATION SIZE FEE (37 CPR 1.16(a))  APPLICATION SIZE FEE (37 CPR 1.16(a))  STORY 1.16(a)  35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(a)													
MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(j))							ı						
* If the difference in column 1 is less than zero, enter "0" in column 2.								TOTAL		ı	TOTAL	400	
APPLICATION AS AMENDED - PART II  (Column 1) (Column 2) (Column 3)								SMAL	L ENTITY	OR		ER THAN ALL ENTITY	
Į.		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUS PAID FOR		PRESENT EXTRA		RATE (\$)	ADDITIONAL FEE (\$)		RATE (\$)	ADDITIONAL FEE (\$)	
AMENDMENT	Total (37 CFR 1.16(i))		Minus	**				x \$ =		OR	x s =		
	Independent (37 CFR 1.16(h))	•	Minus			-		x \$ =		OR	x s =		
Ž	Application Size Fee (37 CFR 1.16(s))												
Ĺ	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(j))									OR			
								TOTAL ADD'L FEE		OR	TOTAL ADD'L FEE		
(Column 1) (Column 2) (Column 3)													
AMENDMENT		CLAIMS REMAINING AFTER AMENDMENT		HIGHES NUMBER PREVIOUS PAID FO	R SLY	PRESENT EXTRA		RATE (\$)	ADDITIONAL FEE (\$)		RATE (\$)	ADDITIONAL FEE (\$)	
	Total (37 CFR 1,16(i))		Minus	**		=		x \$ =		OR	x s =		
፩	Independent (37 CFR 1.16(h))		Minus	***				x \$ =		OR	x \$ =		
Ē	Application Size Fee (37 CFR 1.16(s))									ı			
Αľ	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(j))									OR			
TOTAL ADD'L FEE										OR	TOTAL ADD'L FEE		
** 11	" If the entry in column 1 is less than the entry in column 2, write "0" in column 3.  " If the "Highest Number Previously Paid For IN THIS SPACE is less than 20, enter "20".  "If the "Highest Number Previously Paid For IN THIS SPACE is less than 3, enter "3".  The "Highest Number Previously Paid For "(Total or Independent) is the highest number found in the appropriate box in column 1.												

This collection of information is required by 37 CFR 1.16. The information is required to obtain or retain a benefit by the public which is to file (and by the USE) process) an application. Confidentiality is ownered by \$8 USE. of 122 and 37 CFR 1.14. This collection is estimated to be 12 minutes to complete, including gathering preparing, and submitting the completed application form to the USFIO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burdon, should be sent to the Chief information Officer. US. Fatential and Trademark Office, U.S. Department of Communos, D.O. Box 1450, Aboxandria, VA 2213-1450, DO NOT SEND FEES OR CORPLETED FORMS TO THIS AUDIENTS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 2213-1450.